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Ser. No.: 09/971,980 Filing Date: October 4, 2001 Docket No. UPVG0011-100(M-2351)

Matter No.: 136733

**Title: COMPOSITIONS AND METHODS OF USING
CAPSID PROTEIN FROM FLAVIVIRUSES AND
PESTIVIRUSES**

Pages to Follow: 5

Sender's Name: Daniel M. Scolnick

Date: October 15, 2004

RECIPIENT(S)	COMPANY/FIRM	FAX
Stacy Chen Brown	USPTO	(703) 872-9306

MESSAGE: OFFICIAL FAX

**PLEASE DELIVER TO EXAMINER STACY CHEN BROWN
ATTACHED IS:**

1. Transmittal Form (1 page)
2. Petition for 5 Month Extension of Time (2 pages)
3. Fee Transmittal (2 pages)

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(to be used for all correspondence after initial filing)

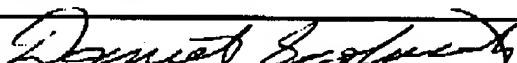
Total Number of Pages in This Submission

Application Number	09/971,980
Filing Date	October 4, 2001
First Named Inventor	David B. Weiner
Art Unit	1648
Examiner Name	Stacy Chen Brown
Total Number of Pages in This Submission	Attorney Docket Number
	UPVG0011-100(M-2351)

ENCLOSURES (check all that apply)

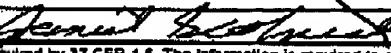
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to Technology Center (TC)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Other Enclosure(s) (please identify below):
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<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD. Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)		
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
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	Remarks	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Daniel M. Scolnick, Ph.D. / 52,201		
Signature			
Date	October 15, 2004		

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name	Daniel M. Scolnick		
Signature		Date	October 15, 2004

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FEE TRANSMITTAL for FY 2005

Effective 10/01/2004. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 1,040.00)

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Complete if Known	
Application Number	08/971,980
Filing Date	October 4, 2001
First Named Inventor	David B. Weiner
Examiner Name	Stacy Chen Brown
Art Unit	1648
Attorney Docket No.	UPVGD0011-100(M-2361)

METHOD OF PAYMENT (check all that apply)				FEE CALCULATION (continued)																																																																	
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account:				3. ADDITIONAL FEE\$ <table border="1"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> </tr> </thead> <tbody> <tr> <td>Fee Code (\$)</td> <td>Fee Code (\$)</td> </tr> <tr> <td>1051</td> <td>130</td> </tr> <tr> <td>1052</td> <td>80</td> </tr> <tr> <td>1053</td> <td>130</td> </tr> <tr> <td>1812</td> <td>2,520</td> </tr> <tr> <td>1804</td> <td>920*</td> </tr> <tr> <td>1805</td> <td>1,840*</td> </tr> <tr> <td>1251</td> <td>110</td> </tr> <tr> <td>1252</td> <td>430</td> </tr> <tr> <td>1253</td> <td>960</td> </tr> <tr> <td>1264</td> <td>1,530</td> </tr> <tr> <td>1255</td> <td>2,080</td> </tr> <tr> <td>1401</td> <td>340</td> </tr> <tr> <td>1402</td> <td>340</td> </tr> <tr> <td>1403</td> <td>300</td> </tr> <tr> <td>1451</td> <td>1,510</td> </tr> <tr> <td>1462</td> <td>110</td> </tr> <tr> <td>1463</td> <td>1,370</td> </tr> <tr> <td>1501</td> <td>1,370</td> </tr> <tr> <td>1502</td> <td>490</td> </tr> <tr> <td>1503</td> <td>880</td> </tr> <tr> <td>1460</td> <td>130</td> </tr> <tr> <td>1807</td> <td>50</td> </tr> <tr> <td>1806</td> <td>180</td> </tr> <tr> <td>8021</td> <td>40</td> </tr> <tr> <td>1809</td> <td>780</td> </tr> <tr> <td>1810</td> <td>790</td> </tr> <tr> <td>1801</td> <td>790</td> </tr> <tr> <td>1802</td> <td>900</td> </tr> <tr> <td>Other fee (specify) _____</td> <td></td> </tr> </tbody> </table>				Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	1051	130	1052	80	1053	130	1812	2,520	1804	920*	1805	1,840*	1251	110	1252	430	1253	960	1264	1,530	1255	2,080	1401	340	1402	340	1403	300	1451	1,510	1462	110	1463	1,370	1501	1,370	1502	490	1503	880	1460	130	1807	50	1806	180	8021	40	1809	780	1810	790	1801	790	1802	900	Other fee (specify) _____	
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The Director is authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s) <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.																																																																					
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1001	2001	395	395	Utility filing fee																																																																	
1002	2002	175	175	Design filing fee																																																																	
1003	2003	275	275	Plant filing fee																																																																	
1004	2004	386	386	Reissue filing fee																																																																	
1005	2005	80	80	Provisional filing fee																																																																	
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*or number previously paid, if greater. For Reissues, see above				*Reduced by Basic Filing Fee Paid																																																																	
SUBMITTED BY				Complete if Applicable																																																																	
Name (Print/Type)	Daniel M. Sosnick	Registration No. (Attorney/Agent)	82,201	Telephone	215-665-6828																																																																
Signature				Date	October 15, 2004																																																																

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PTO/SB/22 (06-04)

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) UPVG0011-100(M-2351)
Application Number 09/971,980		Filed October 4, 2001
For COMPOSITIONS AND METHODS OF USING CAPSID PROTEIN FROM FLAVIVIRUSES AND PESTIVIRUSES		
Art Unit 1648	Examiner Stacy S. Brown	

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

	<u>Fee</u>	<u>Small Entity Fee</u>	
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$110	\$55	\$_____
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$420	\$210	\$_____
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$950	\$475	\$_____
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1480	\$740	\$_____
<input checked="" type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2010	\$1040	\$1,040

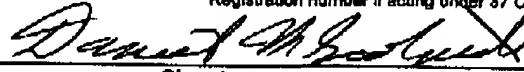
- Applicant claims small entity status. See 37 CFR 1.27.
- A check in the amount of the fee is enclosed.
- Payment by credit card. Form PTO-2038 is attached.
- The Director has already been authorized to charge fees in this application to a Deposit Account.
- The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-1275. I have enclosed a duplicate copy of this sheet.

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I am the

- applicant/inventor.
- assignee of record of the entire interest. See 37 CFR 3.71
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/98).
- attorney or agent of record. Registration Number Daniel M. Scolnick
- attorney or agent under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a). _____



Signature

Daniel M. Scolnick

October 15, 2004

Date

215-665-6928

Typed or printed name _____

Telephone Number _____

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of _____ forms are submitted.